

FINANCIAL AFFIDAVIT

CJA 23

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES
IN THE CASE OF☒ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

FOR

USA

vs.

AT

Salts

S. Dist. of Illinois

E. St. Louis

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Amber M. Salts

- 1 ☒ Defendant—Adult
 2 ☐ Defendant—Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☐ Parole Violator
 6 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ Other (Specify)

DOCKET NUMBERS

Magistrate

District Court

15-30180-DRH
Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box →)

☒ Felony
☐ Misdemeanor

18 USC 2250(a)

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY-
MENTAre you now employed? ☐ Yes ☒ No ☐ Am Self Employed

Name and address of employer:

IF YES, how much do you
earn per month? \$

IF NO, give month and year of last employment

How much did you earn per month \$ doesn't recall

If married is your Spouse employed? ☐ Yes ☒ No

IF YES, how much does your

Spouse earn per month \$

If a minor under age 21, what is your

Parents or Guardian's approximate monthly income \$

OTHER
INCOMEHave you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☒ No

IF YES, GIVE THE AMOUNT

RECEIVED

SOURCES

RECEIVED & IDENTIFY \$

THE SOURCES

CASH

Have you any cash on hand or money in savings or checking account ☐ Yes ☒ No IF YES, state total amount \$PROP-
ERTYDo you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☐ Yes ☒ No

VALUE

DESCRIPTION

IF YES, GIVE VALUE AND \$
DESCRIBE IT

DEPENDENTS

MARITAL STATUS

☐ SINGLE☒ MARRIED☐ WIDOWED☐ SEPARATED OR☐ DIVORCEDTotal
No. of
Dependents

List persons you actually support and your relationship to them

Brian (son - 2 months old)

DEBTS &
MONTHLY
BILLS(LIST ALL CREDI-
TORS, INCLUDING
BANKS, LOAN COM-
PANIES, CHARGE
ACCOUNTS, ETC.)APARTMENT
OR HOME:

Creditors

Total Debt

Monthly Payt.

no debts

no bills

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

I certify the above to be correct.

Amber M. Salts

12-17-15